

- I. <u>AUTHORITY:</u> Tennessee Code Annotated Section 4-3-2708, Medicaid Home and Community Based Services Waivers.
- **PURPOSE**: The purpose of this policy is to provide clarification about the process for handling requests for emergency authorization of waiver services covered through the Medicaid Home and Community Based Services (HCBS) waiver programs and requests for emergency authorization of services state-funded by the Department of Intellectual and Developmental Disabilities.
- **III.** <u>APPLICATION</u>: This policy applies to Regional Office staff that are responsible for authorizing emergency requests for Medicaid HCBS waiver services and state-funded services.

IV. <u>DEFINITIONS:</u>

- A. **Administrator on Duty** or **AOD** means a person designated by the Regional Director to be available to respond to emergency requests for services outside usual business hours (i.e., 8:00 a.m. to 4:30 p.m. Monday through Friday) and on holidays.
- B. Home and Community Based Services waiver or waiver means a Home and Community Based Services waiver for persons with intellectual disabilities that include the following;
 - 1. Home and Community Based Services Waiver for the Mentally Retarded and Developmentally Disabled (#0128.R04.01) and any amendments thereto;
 - 2. Home and Community Based Services Waiver for Persons with Mental Retardation (#0357.R02.01) and any amendments thereto; and
 - 3. Self Determination Waiver Program (#0427.R01.03) and any amendments thereto.
- C. **Emergency Authorization** means a service authorization that is needed prior to the next business day.

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V. <u>POLICY:</u> Emergency authorizations are intended to be limited to those situations where, due to unforeseen circumstances, the person-supported needs a service prior to the next business day, and there is insufficient time for an individual support plan (ISP) amendment to be submitted through the usual ISP amendment process.

VI. PROCEDURES:

- A. Requesting Emergency Authorization of a Service
 - A provider may request Emergency Authorization of a waiver service or statefunded service by contacting the Administrator on Duty (AOD) by telephone or pager outside usual business hours (i.e., 8:00 a.m. to 4:30 p.m. Monday through Friday) or on holidays.
 - 2. Upon receipt of a request for Emergency Authorization of a service, the AOD:
 - a. Shall determine:
 - 1) Whether the requested service is a covered HCBS waiver service or a state-funded service; and
 - 2) If the service is a waiver service, shall determine whether the service is excluded from coverage based on age of the person supported (e.g., non-coverage of behavior services for children under age 21) or failure to meet the waiver service definition;
 - b. May require the provider to provide additional clarifying information by telephone, fax, or other means;
 - c. Shall either authorize the request or refer it to the plans review director or designee in accordance with the following:
 - If the AOD determines that the request is approvable, the AOD shall authorize an amount not to exceed an amount that is sufficient until the next business day; or
 - 2) If the AOD determines that the request does not qualify as emergency or that the request cannot be approved, the AOD shall refer the request to the plans review director or designee the next business day for further review; and
 - d. Shall complete a **Request for Emergency Service Authorization** form (see Appendix A), indicating the disposition of the request (i.e., authorization or referral).

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- B. Processing Completed *Request for Emergency Service Authorization* Forms:
 - When the AOD approves a request for Emergency Authorization of a service, the AOD shall submit the completed *Request for Emergency Service Authorization* form to the Regional Office Administrative Services staff on the next business day, so that the cost plan can be updated.
 - a. The approved Request for Emergency Service Authorization form shall be considered to be a type of amendment to the Individual Support Plan (ISP) and shall be maintained with the ISP. The Support Coordinator or case manager shall not be required to submit an amendment to the ISP unless the service needs to be continued beyond the time period covered by the emergency authorization.
 - b. Regional Office Administrative Services staff shall distribute a copy of the approved *Request for Emergency Service Authorization* form to the Support Coordinator or case manager and to the applicable provider.
 - When the AOD determines that a request does not qualify as emergency or cannot be approved and refers it for further review, the plans review director or designee shall contact the Support Coordinator or case manager, as applicable, regarding the service request so that an ISP amendment and any necessary supporting documentation can be submitted.
- C. If services are needed beyond the emergency authorization period, the ISC or case manager shall submit an ISP amendment and any necessary supporting documentation to the Regional Office the next business day.

VII. ATTACHMENTS:

A. Request for Emergency Service Authorization Form

VIII. TENNCARE APPROVAL: March 2, 2012